

Application Data Sheet

Application Information

Application Type:: Regular
Subject Matter:: Utility
Suggested Group Art Unit:: N/A
CD-ROM or CD-R?:: None
Sequence submission?:: None
Computer Readable Form (CRF)?:: No
Title:: MENISCAL REPAIR SCAFFOLD
Attorney Docket Number:: 022956-0259
Request for Early Publication?:: No
Request for Non-Publication?:: No
Total Drawing Sheets:: 5
Small Entity?:: No
Petition included?:: No
Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Stephanie
Middle Name:: M.
Family Name:: Kladakis
City of Residence:: Watertown
State or Province of Residence:: MA
Country of Residence:: US
Street of mailing address:: 56 Boylston Street
City of mailing address:: Watertown
State or Province of mailing address:: MA
Postal or Zip Code of mailing address:: 02472

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Steven
Middle Name:: M.
Family Name:: Bowman
City of Residence:: Sherborn
State or Province of Residence:: MA
Country of Residence:: US
Street of mailing address:: 26 Woodland Street
City of mailing address:: Sherborn
State or Province of mailing address:: MA
Postal or Zip Code of mailing address:: 01770

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Robert
Middle Name:: R.
Family Name:: Steckel
City of Residence:: Norwalk
State or Province of Residence:: CT
Country of Residence:: US
Street of mailing address:: 21 Possum Lane
City of mailing address:: Norwalk
State or Province of mailing address:: CT
Postal or Zip Code of mailing address:: 06854

Correspondence Information

Correspondence Customer Number:: 021125

Representative Information

Representative Customer Number:: 021125
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